Slate Mailer **Late Payment Report**

Type or print in ink, Amounts may be rounded to whole dollars.

RECEIVED AND FILED MAILER LATE PAYMENT REPORT in the office of the Secretary of State of the State of California CALIFORNIA 100

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Amendment No.	OCT 2 2 2008	For Official Use Only
Report No1	DEBRA BOWEN Secretary of State	R

		Report No. 1 DEBRA BOWEN Secretary of State	R
NAME OF SLATE MAILER ORGANIZATION		STREET ADDRESS	
California Young Professionals Voter Guide			
AREA CODE/PHONE NUMBER OPTIONAL: FAX/E-MA	IL I.D. NUMBER 1308954	CITY Garden Grove CA, 92841	STATE ZIP CODE
Late Payment(s) Received From:		NAME OF CANDIDATE OR BALLOT MEASURE:	
NAME Michael O'Gara	I.D. NUMBER (if applica.	bie)	☐ SUPPORT ☐ OPPOSE
ADDRESS CITY	STATE ZIP CODE	OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BALLOT MEASURE'S JURISDICTION	AMOUNT ATTRIBUTED \$
Montros OCCUPATION/EMPLOYER OR NAME OF BUSINESS IF SELF-EI DATE RECEIVED:	e, CA 91020 MPLOYED (if applicable) AMOUNT	NAME OF CANDIDATE OR BALLOT MEASURE:	☐ SUPPORT ☐ OPPOSE
10/21/2008 /	\$ 4,125.0	OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BALLOT MEASURE'S JURISDICTION	AMOUNT ATTRIBUTED \$
NAME OF CANDIDATE OR BALLOT MEASURE: Michael O'Gara	SUPPORT OPPOSE	NAME OF CANDIDATE OR BALLOT MEASURE:	☐ SUPPORT ☐ OPPOSE
OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BA MEASURE'S JURISDICTION Superior Court Judge; District 94	\$ 4,125.00	OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BALLOT MEASURE'S JURISDICTION	AMOUNT ATTRIBUTED
NAME OF CANDIDATE OR BALLOT MEASURE:	□ SUPPORT □ OPPOSE	NAME OF CANDIDATE OR BALLOT MEASURE:	☐ SUPPORT ☐ OPPOSE
OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BAI MEASURE'S JURISDICTION	\$	OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BALLOT MEASURE'S JURISDICTION	AMOUNT ATTRIBUTED

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Slate Mailer
Late Payment Report

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Amounts	may be rounded to whole dollars	•			

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RECEIVED AND SALE in the office of the State of California	CALIFORNIA FORM	498

		of the State of	FORN	1 730
☐ Amendment N	o	OCT 2 2 2008	For O	fficial Use Only
Report No.	001	DEBRA BOWEN Secretary of State		
STREE	TADDRESS			
спу			STATE	ZIP CODE
San	Francisco		CA	94188-4692
NAME	OF CANDIDATE	OR BALLOT MEASURE:	SUP	PORT

NAME OF SLATE MAILER ORGANIZATION		STREET ADDRESS		
African-American Democratic	Club			
AREA CODE/PHONE NUMBER	PTIONAL FAXE-MAIL	I.D. NUMBER	спу	STATE ZIP CODE
415/267-3921		pending	San Francisco	CA 94188-4692
Late Payment(s) Received	d From:		NAME OF CANDIDATE OR BALLOT MEASURE:	SUPPORT
NAME Committee to Stop the Blank	Check	I D. NUMBER (4 applicable)		OPPOSE
		1308261	OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BALLOT MEASURES JURISDICTION	AMOUNT ATTRIBUTED
ADDRESS	CITY	STATE ZIP CODE	A STATE OF THE STA	S
San Rafael CA 94901 OCCUPATION/EMPLOYER OR NAME OF BUSINESS IF SELF-EMPLOYED (if apal/cable)		NAME OF CANDIDATE OR BALLOT MEASURE:	SUPPORT	
n/a	BUSINESS IF SELF-EMPLUYE	D (ir aρρίταδιε)		□ OPPOSE
	AMOUN \$	10,000	OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BALLOT MEASURE'S JURISDICTION	AMOUNT ATTRIBUTED
NAME OF CANDIDATE OR BALLOT Prop. H	MEASURE:	SUPPORT OPPOSE	NAME OF CANDIDATE OR BALLOT MEASURE:	SUPPORT OPPOSE
OFFICE SOUGHT AND JURISDICTION OF MEASURE'S JURISDICTION San Francisco	FTHE CANDIDATE/BALLOT	\$ 10,000	OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BALLOT MEASURE'S JURISDICTION	AMOUNT ATTRIBUTED
NAME OF CANDIDATE OR BALLOT	MEASURE:	SUPPORT OPPOSE	NAME OF CANDIDATE OR BALLOT MEASURE:	☐ SUPPORT ☐ OPPOSE
OFFICE SOUGHT AND JURISDICTION O MEASURE'S JURISDICTION	F THE CANDIDATE/BALLOT	AMOUNT ATTRIBUTED SOS PO	OFFICE SOUGHT AND JURISDICTION OF THE CANDIDATE/BALLOT	AMOUNT ATTRIBUTED

FAX (916) 653-5045

VIS.F. Department of Elections
FAX (415) 554-7344

EL.A. County Registrar/Recorder
FAX (562)651-2548

FPPC Form 498 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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Slate Mailer Late Payment Report

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Amendment No.	OCT 2 2 2008	FORM TO C
Report No. 2	DEBRA BOWEN	<i>y</i> 2

			L. Amendment No.	0C1 2 2 2000	For Official Use Only
			Report No. 2	DEBRA BOWEN Secretary of State	N
IAME OF SLATE MAILER ORGANI	ZATION '		STREET ADDRESS	- or otary or otate	10
alifornia Young Profession	als Voter Guide				
REA CODE/PHONE NUMBER	OPTIONAL: FAX/E-MAIL	1.D. NUMBER	CITY		
			CIT		STATE ZIP CODE
		1308954	Garden Grove CA	00044	
te Payment(s) Receive	d From:		NAME OF CANDIDATE	OR BALLOT MEASURE:	T
AME				THE THE AGONE.	SUPPORT
		I.D. NUMBER (if applicable	?)		□ OPPOSE
es on 11 - Hold Politician	ns Accountable	1308387	OFFICE SOUGHTAND II	(Displaying)	
		1300307	MEASURE'S JURISDICTIO	RISDICTION OF THE CANDIDATE/BALLOT	AMOUNT ATTRIBUTED
DDRESS	CITY	STATE ZIP CODE			\$
	San Rafael,	63	11115 05 01115	OR BALLOT MEASURE:	
		_CA 94901	NAME OF CANDIDATE	OR BALLOT MEASURE.	
CCUPATION/EMPLOYER OR NAME OF	BUSINESS IF SELF-EMPLOYE	D (if applicable)		ON BALLOT WEASURE:	T SUPPORT
CCUPATION/EMPLOYER OR NAME OF	BUSINESS IF SELF-EMPLOYE	D (if applicable)		ON BALLOT MEASURE.	SUPPORT
	BUSINESS IF SELF-EMPLOYE	D (if applicable)			☐ SUPPORT ☐ OPPOSE
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5	Late Payment	Report

late Mailer ate Payment Report	,	Type or prin	t in ink. ed to whole dollars.	RE in the	office of the Secretary of the State of California	CALIFORNIA 498
			Amendment No	,	OCT 2 2 2008	For Official Use Only
			Report No	1	DEBRA BOWE	N R
NAME OF SLATE MAILER ORGANIZATION	74.00		STREET	ADDRESS	Sacietal à m ave	
CA Family Voice Newsletter, a project Policy Issues Institute						
AREA CODE/PHONE NUMBER OPTIONAL: FAX	K/E-MAIL	I.D. NUMBER	CITY			STATE ZIP CODE
714-895-3195		1310975	Garder	Grove CA, S	92841	
ate Payment(s) Received From:			THE T- COLUMN TWO IS NOT THE TOTAL PROPERTY.	OF CANDIDATE OR B	22000000000000000000000000000000000000	
NAME		1.5.00000				☐ SUPPORT
A SECOND PORT OF THE PROPERTY		I.D. NUMBER (if applicab	9)			OPPOSE
Yes on 11 - Hold Politicians Accounta	ble	1308387			CTION OF THE CANDIDATE/BALL	OT AMOUNT ATTRIBUTED
ADDRESS	CITY	STATE ZIP CODE	MEASUR	RE'S JURISDICTION		s
	0111	CIAIL ZIP CODE				
OCCUPATION/EMPLOYER OR NAME OF BUSINESS IF	n Rafael,	CA 94901	NAME	OF CANDIDATE OR B	BALLOT MEASURE:	SUPPORT
SOUTH THE COLLAR ON NAME OF BUSINESS IF S	SELF-EMPLOTEL	у (паррисавіе)				☐ OPPOSE
DATE RECEIVED:	AMOUN	ī	OFFICE	COLICUTAND MICHOR	CTION OF THE CANDIDATE/BALL	OT AMOUNT ATTRIBUTED
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		2,500.00	V 1000000000000000000000000000000000000			\$
NAME OF CANDIDATE OR BALLOT MEASURE: Proposition 11		SUPPORT	NAME	OF CANDIDATE OR E	BALLOT MEASURE:	
220pob2c1on 11	1					SUPPORT
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		2,300.00	Township In			
NAME OF CANDIDATE OR BALLOT MEASURE:		SUPPORT	NAME	OF CANDIDATE OR E	BALLOT MEASURE:	SUPPORT
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